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Currently the Canadian government provides qualified medical attention for Indians at two hospitals, one for Yukon Indians in Whitehorse and another for Indians of British Columbia at Fort St. John. The former hospital is about three hundred miles from Lower Post, while the latter is about six hundred. To secure admission and permission for air travel to either hospital, the missionary or police must radio the Indian Agent at Telegraph Creek. Should the agent be away from his office, traveling in the performance of his duties, a reply to the wire giving authorization for transportation and hospitalization may be delayed for several days. Such delay occurred during the summer of 1945 in the case of a young victim of spinal meningitis. The boy was in delirium for three days before authorization was received to fly him to Whitehorse, where he died and was buried.

A nurse and physician employed by the Indian Affairs Branch visit the Indian community at Lower Post each summer and suggest medical or hospital treatment as required. The Mounted Police remain vigilant for evidence of venereal infection, and when a source of such disease is reported insist on the patient receiving prompt treatment. These precautionary attitudes contribute to the fact that the degree of venereal infection, despite the recent large influx of strangers, is relatively slight.

Native attitudes toward hospitalization vary. A number of men expressed admiration for the air forces' hospital at Watson Lake and also spoke well of the care they had received in the government hospital at Whitehorse. Other people severely criticized the regimen of public hospitals, some without themselves having been patients. Speaking of the Whitehorse institution, where he had gone to have a dislocated hip bone reset, Old Man claimed that the wards for white patients are superior to those reserved for Indians. Asked how he liked the hospital, he answered: "I didn't like it. You smell something." The odor, he said, reminded him of death and was absent in the white wards which he had casually visited. He admitted that the staff of the institution had "treated me fine." Another informant complained that the same hospital had starved his young daughter, feeding her only bread and water twice a day. He asserted that the hospital employs doctors at government expense who try to starve Indians to death.

Death

Death, the separation of body and soul, is a condition that usually results from old age and from serious illness or accident. In holding these notions of death, the Kaska are not stoic fatalists resigned to dying. For the individual, his family, and friends the final moment is to be avoided and delayed as long as possible. Death, a bad thing in the contemplation of which the Indian is never at ease, not only represents a tragedy for the deceased, but also introduces danger for the surviving members of the latter's family as well as other members of the community who may come into the orbit of the event.

The living organism represents a union of body and soul or, as the latter is referred to by the Kaska, wind.[38] Some people also reported the spiritual existence of the shadow, but did not clearly differentiate this concept from wind. Although death represents a final dissolution of the body-soul relationship, certain temporary alienations may occur without neces-

[38] Throughout this section the words "soul" (wind) and "spirit" will be used with certain definite meanings. The term soul refers to the spiritual attribute of the body. Upon death it becomes a spirit. The visible manifestation of a spirit is referred to as a "ghost."

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751 instructions. While dishes were washed between servings, the water was not boiling nor was it changed.

751 Nevertheless some instances of preventative medicine can be given. Most men are cautious in having sexual intercourse with suspected carriers of venereal disease; the condom as well as urination following coitus are recognized as safeguards against acquiring genital infections. Parents were several times observed to call their youngsters away from one or two children who carried impetigo scars, in one case a seven year old victim of this disease being told: "Go away, you're diseased." In the spring of 1945, following the dysentery outbreak of the previous fall and winter, Old Man burnt the toilet brush near his settlement. He explained that the area had been used by people suffering from the illness. Old Man also dug a new latrine. Following death, old clothes, particularly those which were in contact with a sick person, are abandoned in the brush or burnt. A number of years ago, during a serious flu epidemic in Lower Post, a group of Espato·tena is said to have fled from the town in order to avoid the sickness.

744 Quarantine control of contagious disease was introduced to the community at Lower Post on July 28, 1945, when the death of a boy from spinal meningitis led the Mounted Police and the provincial policeman to post the western reserve. The quarantine was far from complete, however, consisting of little more than a prominently lettered sign being placed at each of the two main entrances to the area. In addition the missionary sought to segregate the school children from this reserve, while adults were advised to limit their shopping trips into town to once a day. The lax enforcement of the quarantine resulted in its consistent violation by everyone except the parents of the boy who had died (not, however, by his next younger brother). People continued to leave the area frequently, ate in the restaurant and at the lunch counter, and attended church. Few people from other quarters of the community avoided visiting friends or dances in the restricted reserve and two potlatches were even celebrated there during the term of the quarantine. Only the white residents of Lower Post were explicitly warned to observe the posting on the occasion of the first potlatch. Several Indians, including the family of the deceased, expressed annoyance at the theoretical infringement of their freedom introduced by the quarantine, and several times adolescent boys tore up the signs and tossed them into brush where they were retrieved by the provincial policeman and remounted. The quarantine was officially in effect for over a month.

752 It has already been stated that the Kaska are not an accident prone people. Nevertheless accidents do occur and are generally attributed to carelessness, drunkenness, or "bad luck." Associated with the relative infrequency of accidents is the fact that most people manifest a realistic, though not exaggerated, concern with safety. In case of necessity, however, considerations of safety are readily sacrificed to expediency combined with caution. A person will travel during a snowstorm or in very low temperatures if the journey is important or has once begun. Parents do not worry unduly about household dangers. Sharp tools, scissors, axes, and knives are often left lying around the camp where children are free to handle them. Nobody was observed to take foolhardy chances, however, and when any real threats of danger are pointed out, the advice given is generally heeded.

The treatment of accidents is not developed beyond a simple, practical level. Small cuts and bruises are not treated. More serious cuts are bandaged. It is felt that serious wounds